## City of St. Louis JURY STIPEND AUTHORIZATION FORM

Employee:	Last Name	First Name	M.I.	Soc. Sec. No.
	Last Ivallie	THSCINGING	1V1.1.	500. Sec. 110.
748		1	/	
	Dept./Div. Name	e Dept. No.	Pay Loc. No.	
Status:	Bi-weekly (509	% or more) $\square$ Bi-	weekly (less than 50%	Per Performanc
es of Jury Se	rvice From	n/	To/	1
nber of Days	Eligible to Keep S	tipend:		
T 11 . D	0.D. (F. 0)	/2/07 F		
Indicate Re	eason & Dates: (E.g. 2/.	(3/97:Employee's day off)		
-				
-				<b>*</b> ****
Comple	te this Section if F	Employee's Tury Service	was in ST I OHIS	S CIRCILIT COURT
	ipend \$ <u>12.00</u> x	No. of eligible days	. =	S CIRCUIT COURT -
Daily Jury St	ipend \$12.00 x (Attach copy of s	-	visor) =	S CIRCUIT COURT -
Daily Jury St	ipend \$\frac{12.00}{Attach copy of s}  AMOUNT DUE	No. of eligible daysstatement from Jury Supers	visor)	\$
Daily Jury St	ipend \$12.00 x (Attach copy of s	No. of eligible daysstatement from Jury Supers	visor) =	\$
Daily Jury St	ipend \$\frac{12.00}{Attach copy of s}  AMOUNT DUE To Distribution of Copies	No. of eligible days statement from Jury Supers THE EMPLOYEE: es: Original Jury Supe	visor) = visor; Copy Origina	\$ ating Department
Daily Jury St	ipend \$\frac{12.00}{Attach copy of s}  AMOUNT DUE To Distribution of Copies	No. of eligible days statement from Jury Supers THE EMPLOYEE: es: Original Jury Supe	visor) = visor; Copy Origina	\$
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